OMENT	Total	•	Minus	**	=	
SNTC		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	
		(Column 1)		(Column 2)	(Calumn 3)	
	FIRST PRESENTATION OF MOUTIFEE DEFENDENT DESIGN					

Minus *** Independent FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM " If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

ADDI-ADDI-TIONAL TIONAL RATE RATE FEE FEE X\$18= X\$ 9= OR X78= X39= OR +260= +130= OR TOTAL OR ADDIT. FEE ADDIT. FEE The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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FORM PTO-875 (Rev. 12/99)